Substitute for form 1449/PTO (Revised 07/2007)			ļ	Complete if Known							
			Application Number			r	09/812,452				
			Filing Date			March 20, 2001					
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				First Named Inventor		or					
				Art Ullit			3691				
				Examiner Name		Akintola, Olabode					
Sheet	1	of 1	A	Attorney Docket Nu			umber 018360/205526				
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Examiner Signature						Date Consid	dered				

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.